



## A Message from our Chief Medical Officer

As I am rounding out my first year here at CCHP, I am happy to report I feel that we are making great progress in the goals of improving timely access, simplifying processes, and doing the right thing for the patient while innovating and elevating the quality of care.

Much of my time during the last few months has been focused on improving utilization management operations. For our CPN providers, we are in the process of moving everyone over to the CCHP ccLink Provider Portal and getting rid of faxes. We have completed the majority of the transition but are still working with our IT team and some remaining providers to round out this process. Moving to electronic referrals has led to improved processing times in UM while decreasing the back and forth that has occurred with providers.



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## A Message from our Chief Medical Officer continued

We have also streamlined a number of internal UM processes and requirements to allow for quicker decisions and to get the patients the care that they need. One highlight is the new bariatric surgery/gastric bypass referral process which is hopefully much simplified based on the copious feedback that you all have provided. A second is the new process for requesting both home health services and incontinence supplies, which will lead to less back and forth with providers, the home health and/or supply agencies, and CCHP. We are working on other things such as simplifying the process for catheters, wound care supplies, and other DME over the next few months. If you have any suggestions or concerns on processes we can simplify/improve, please feel free to reach out to me at [dhsieh@cchealth.org](mailto:dhsieh@cchealth.org).

As a reminder, the [Interactive No Authorization Required](#) and [Referral Only](#) lists ONLY APPLY to a member when they are receiving services within their assigned provider network. This means for patients with Commercial A, Commercial IHSS, and other Commercial CCHP product lines (except CCHP Commercial B), all services not provided within the CCRMC Network MUST have prior authorization even if they are on the No Authorization List or Referral Only List.

Our new quality director, Tammy Fisher, started recently. We are excited that she is here and look forward to working with all of you and her on our ongoing quality initiatives including, but not limited to, improving care for individuals with asthma and/or diabetes, ensuring age-appropriate blood lead screening for children, completing the initial health assessment, and assuring both well-child visits and immunizations are being completed.

Finally, CCHP has brought on a number of new Behavioral Health Providers. As we know, COVID-19 has increased the need for mental health services. Again, as a reminder, all providers who are qualified to provide services for those with mild to moderate severity can provide and be reimbursed for up to 8 sessions without needing prior authorization from CCHP. After the eighth session, if additional services are needed, the provider can reach out to CCHP for prior authorization for additional sessions.

If the provider does not feel equipped to provide these services, please continue to connect the member to the Access Line: 888-678-7277.

For those individuals with moderate to severe severity and those with specialty member health needs, please also connect these individuals to the Access Line: 888-678-7277.

CCHP members with Commercial A/IHSS/B and other commercial products should reach out to CCHP's Behavioral Health Team ([Robin.Bevard@cchealth.org](mailto:Robin.Bevard@cchealth.org)) if they need additional assistance.

If you have any challenges with the Access Line, please reach out to Katy White ([katy.white@cchealth.org](mailto:katy.white@cchealth.org)) for further assistance.

Thank you for all of your hard work and hope that everyone is having a safe summer!

In solidarity,

Dennis Hsieh, MD, JD



## COVID-19 Vaccination Incentives

As the COVID-19 pandemic rages on, the Department of Health Care Services (DHCS) has found that across all counties in California, the Medi-Cal population has a lower vaccination rate than the general population. DHCS is thus asking CCHP to work with all providers to help Medi-Cal members vaccinated. The disparity is even greater with African Americans and Latinos. CCHP will be offering gift cards to every CCHP Medi-Cal member if they are vaccinated. CCHP will also be working to develop incentives for health practices and systems to assist in closing the gap in vaccination for their CCHP Medi-Cal members. More information will be coming soon!



## COVID-19 Vaccination Booster

CCHP will now cover the COVID-19 booster shot. All immunocompromised patients should get a booster shot. Immunocompromised is defined by the CDC as (<https://www.cdc.gov/coronavirus/2019-ncov/vaccines/recommendations/immuno.html>)

- Been receiving active cancer treatment for tumors or cancers of the blood
- Received an organ transplant and are taking medicine to suppress the immune system
- Received a stem cell transplant within the last 2 years or are taking medicine to suppress the immune system
- Moderate or severe primary immunodeficiency (such as DiGeorge syndrome, Wiskott-Aldrich syndrome)
- Advanced or untreated HIV infection
- Active treatment with high-dose corticosteroids or other drugs that may suppress your immune response

Please reach out and inform your patients. CCHP will be working on providing a patient list to support provider efforts. Homebound members can get a COVID vaccine from CCHS's mobile clinic – one can request an appointment here: [Get Vaccinated | Coronavirus \(cchealth.org\)](https://cchealth.org/get-vaccinated-coronavirus).

## Flu Shot Reminders

Given we are heading into flu season again, CCHP wants to ask providers to remind and encourage their patients to get a flu shot. Every person 6 months and older should get a flu shot. If your office does not give flu shots, a CCHP member can get a flu shot by bringing their CCHP ID to:

- any Rite Aid (for members ages 3 years old & up)\*
- any Walgreens (for members ages 3 years old & up)\*

\* Tip: Be sure to call the pharmacy in advance to avoid long waits.



## Bariatric Bypass Surgery Process Update

CCHP has updated our Bariatric Bypass Surgery Process. Please use the following forms and criteria when referring individuals for bariatric bypass. The old forms will no longer be accepted. These forms are also available electronically in the ccLink Provider Portal. There are two forms in the PDF - one form to make a referral for PA to a bariatric surgeon and a second form for the bariatric surgeon to request PA for a bariatric surgery procedure. If you need provider portal access, the forms are located on the website at <https://cchealth.org/healthplan/providers/>.

Here is the direct link: <https://cchealth.org/healthplan/pdf/provider/Appendix-M-PA-Gastric-Bypass.pdf>

Forms can be faxed to CCHP at (925) 313-6058.

If you have any questions regarding this form or process, please email [CCHPauthorizations@cchealth.org](mailto:CCHPauthorizations@cchealth.org).

## Referrals – Important Information

CCHP is primarily a Medi-Cal Managed Care Plan with a small Commercial membership for county employees. Medi-Cal members can choose to receive services in either the Community Provider Network (CPN) or the Contra Costa Regional Medical Center (CCRMC) Network. Commercial members also choose a Network, depending on the type of insurance they choose. **A member's network is determined by the network their PCP participates in.** Members are expected to receive Specialty Care and Services (imaging, etc.) within their network.

- For Medi-Cal members in the CCRMC Network, their providers can refer directly to a CCRMC or CPN specialist if the specialist does not require a prior authorization (see below).
- For Medi-Cal members in the CPN, their providers can refer to a CPN or CCRMC specialist if the specialist does not require a prior authorization (see below).
- For Commercial members with Plan A, A2 or IHSS, whose network is only CCRMC, **any referral to a specialist outside of CCRMC requires prior authorization.**
- For Commercial B, their CPN providers can refer to a CCRMC or CPN specialist if the specialist does not require a prior authorization (see below).

Please refer to the electronic Interactive No Authorization Required List that is located on our website at <https://cchealth.org/healthplan/providers>. All other Specialties and services not on the list will require Prior Authorization.



**Please note!** For all providers, it is your responsibility to check a member's eligibility before providing services. As a **referring** provider, you must choose specialists and services within the member's network. **All referrals** to providers or services who are **not contracted with CCHP** require Prior Authorization.

## CCHP Clearinghouse transition to Availity

Effective **September 20<sup>th</sup>, 2021**, Contra Costa Health Plan (CCHP) will be transitioning from Docustream to Availity as our new clearinghouse. As our team is working on the final phase of the transition, we would like to share a few changes that may require your actions.

1. **If your organization is currently submitting electronic claims through a clearinghouse to Docustream**, we are working directly with your clearinghouse to redirect the claims to Availity. While Availity connects with majority of clearinghouses, to avoid any disruption of your claim submission, please provide your clearinghouse the new CCHP payer IDs as soon as possible:
  - **Contra Costa Health Plan - Payer ID: [CCHS](#)**
  - **Contra Costa Behavioral Health Plan - Payer ID: [CCMHP](#)**
2. **If your organization is currently submitting electronic claims directly to Docustream**, you are **required** to enroll with Availity in order to submit EDI claims to CCHP. Please visit <https://www.availity.com/provider-portal-registration> to begin your registration process.
3. **If your organization is currently using DocuHealth Link for claim submission**, this feature will no longer be available. You may sign up for CCHP's ccLink Provider Portal where you can enter and submit claims directly to CCHP. To sign up, please visit <https://cchealth.org/healthplan/providers/>, complete the ccLink Provider Portal Access Agreement form, and email it the [CCHPportalsupport@cchealth.org](mailto:CCHPportalsupport@cchealth.org). If you have already signed up for ccLink Provider Portal access, please reference the website for instructions regarding submitting claims.
4. **If your organization is currently submitting paper claims**, we invite you to sign up for the ccLink Provider Portal (see #3 above) to expedite the reimbursement process. However, if you must submit a paper claim, please note that our mailing address for claim submission has changed:
  - For CCHP Medical Claims, please mail your paper claims to:  
**P.O. Box 5122, Lake Forest, CA 92609**
  - For Behavioral Health Claims, please mail your paper claims to:  
**P.O. Box 5143, Lake Forest, CA 92609**

CCHP continues to offer electronic payments to providers. To register, please send an email to [EDIsupport@cchealth.org](mailto:EDIsupport@cchealth.org).

For questions related to claims submission to Availity, please visit <https://www.availity.com/edclearinghouse>.

For questions regarding claim entry, referral entry or reviewing claims & referrals and more using the Provider Portal, please reach out to [CCHPportalsupport@cchealth.org](mailto:CCHPportalsupport@cchealth.org).

For questions related to the overall Availity transition, please reach out to [EDIsupport@cchealth.org](mailto:EDIsupport@cchealth.org).





## Attention Primary Care and Behavioral Health Providers: New Medi-Cal Collaborative Care Benefit

This benefit is designed to help increase access to and quality of care for behavioral health services. The Collaborative Care Model (CoCM) is a model that allows the primary care provider to offer patient-centered, team-based care in collaboration with a behavioral health care manager and a psychiatric consultant. Patients in CoCM are part of a registry. The team can bill for care under CPT codes 99492, 99493, and 99494 for a total of up to 130 minutes a month in the first month and up to 120 minutes a month in subsequent months. The billing occurs through the PCP for all the team members. FQHCs may bill for CoCM services and receive their bundled rate when these services are delivered by a billable provider. To bill for these services, the team must provide all the elements required by Medi-Cal through the visits.

CPT 99492 (70 minutes) + CPT 99494 (up to 60 minutes): For the initial month this includes an initial assessment with administration of validated ratings scales and development of an individualized treatment plan, outreach and engagement in treatment of a patient directed by the treating physician or other qualified healthcare professional, ensuring patient is in a registry, tracking and documenting follow-up and progress using the registry, weekly caseload consultation with the psychiatric consultant who reviews and recommends modifications of the plan if necessary, and provision of brief interventions using evidence-based techniques such as behavioral activation, motivational interviewing, and other focused treatment strategies.

CPT 99493 (up to 60 minutes) + CPT 99494 (up to 60 minutes): For subsequent months this includes ongoing collaboration with and coordination of a patient's mental health care, relapse prevention planning as a patient achieves remission of symptoms and/or other treatment goals and are prepared for discharge from active treatment, additional review of progress and recommendation for changes provided by the psychiatric consultant, tracking and documenting patient follow-up and progress using the registry, participation in weekly caseload consultation with the psychiatric consultant, monitoring of patient outcomes using validated rating scales, treatment plan review by the psychiatric consultant with modifications of the plan if recommended, and provision of brief interventions using evidence-based techniques such as behavioral activation, motivational interviewing, and other focused treatment strategies.

For more information, please see Medi-Cal December 2020 Bulletin 558, item #4 <https://files.medi-cal.ca.gov/pubsdoco/bulletins/artfull/ob202012.aspx#a4>



## Transition from eFax to the ccLink Provider Portal

**CCHP is transitioned from faxes to the CCHP ccLink Provider Portal for all CPN providers. CCRMC providers will continue to use ccLINK.** CCHP will continue to remind providers over the next few weeks that faxes will no longer be accepted and that all requests must come in through the CCHP ccLink Provider Portal.

Documents that should be sent via the ccLink Provider Portal include:

- Appeals (submit within 365 days from payment or denial—resolved within 45 business days)
  - [ccLink Instructions on the Appeal or Dispute Entry Process](#)
- Referrals
  - [ccLink Instructions on the Referral Entry Process](#)
- Claims (if not sending through a clearinghouse)
  - ccLink Instructions on Claim Data Entry of [UB04](#), [CMS1500](#), [attaching documents](#), and [Tips](#)
- Clinical Notes
- Hospital Admission or Observation Notifications via Face sheet

If you do not already have access to the ccLink Provider Portal, please download and complete the ccLink Provider Agreement posted on our website: <https://cchealth.org/healthplan/providers/>.

- Here is a direct link to the ccLink Provider Agreement that includes the application on the last page: <https://cchealth.org/healthplan/pdf/provider/cclink-provider-agreement.pdf>.
- Once complete, email it to the ccLink Provider Portal team at [CCHPPortalSupport@cchealth.org](mailto:CCHPPortalSupport@cchealth.org).

**CCHP has received a lot of requests in the past few months for access. If you have already submitted a request, you should be granted access within 3-4 weeks of your complete request being submitted.**

## ccLink Provider Portal Update

Claims Entry Tip Sheets, other health coverage (OHC) information, member CCHP coverage information, along with other helpful documents are now available through the ccLink Provider Portal.

Please see the previous article regarding how to request access to the ccLink Provider Portal if you don't already have access.

## DHCS Medi-Cal Dental Program and Primary Care Physician Toolkit

The Department of Health Care Services (DHCS) Medi-Cal Dental Program has created a Primary Care [Physician Toolkit](#). This Toolkit makes available new and additional oral health resources for primary care physicians delivering the care or coordination of services to Medi-Cal members. The Toolkit provides physicians with access to:

- A [Medical Dental Education Pad](#) for patient dental care reminders
- Dental training for physicians and medical staff, continuing education credit opportunities, and other important information
- Websites with oral health guidelines

Detailed descriptions of each resource can be found in the [Primary Care Physician Toolkit: Description of Resources](#) link.

For a complete list of helpful links and materials, please visit the [Smile, California website](#) or [Medi-Cal Dental website](#).



# ABA Appointment Tip Sheet

## What is Applied Behavioral Analysis (ABA)?

**ABA** is based on the science of learning and behavior. The goal is to increase helpful behaviors and decrease the difficult or harmful behaviors. An individual plan for your child is designed to improve language, communication, focus and social skills so they can function better at school and in your home. **ABA** emphasizes positive reinforcement to encourage behavior changes. Some behaviors may respond better than others.

## What is a Functional Behavioral Assessment (FBA)?

**FBA** is the first step to designing the plan for your child. An assigned ABA provider will do an evaluation of your child to determine their needs, skills, interests, and preferences. From there a detailed program unique to your child and family will be created. The program is modified along the way to meet your child's needs. You are a vital part of the process.

## To Make An ABA Appt:

1. Wait for the approval letter from **CCHP** to arrive in the mail. It will authorize your child for a **Functional Behavioral Assessment (FBA)**.
2. Contact the provider listed on the bottom of the letter (this info may also be located on the back of the letter, near the bottom).
3. Schedule the **FBA** with the assigned **ABA provider**.
4. After the **FBA** is completed, it may take up to 3 weeks before **ABA** services can begin.
5. The **ABA provider** may ask for additional medical records, if they do, call your child's pediatrician or medical records dept for assistance in obtaining your child's medical records.
6. For questions regarding the status of the **FBA** or **ABA** appointment, please contact the **ABA provider directly**. If you encounter a problem with the ABA provider, contact CCHP member services at (877) 661-6230, or online at <https://cchealth.org/healthplan/cchp/>

## Additional Info:

- Please keep the ABA provider's phone number in a place where you can find it.
- If your child is consistently late / not attending appointments, the ABA provider may cancel services.

## For Center-Based ABA Services:

- Please be on time for the appointment.
- If you are running late or cannot make it, please notify the ABA provider.

## For Home-Based ABA Services:

- Please have an available parking spot close to the home for the ABA therapist to park.
- Please have your home free of clutter / debris so the ABA therapist can work safely with your child.





## Initial Health Assessment

It is essential that Primary Care Providers (PCPs) complete the Initial Health Assessment in order to develop a complete picture of the member's health status and formulate a plan of care based on the patient's acute, chronic, and preventive health care needs. All components of the IHA must be completed within 120 days of member enrollment with CCHP.

According to the Department of Health Care Services (DHCS), the required IHA includes:

- A complete physical, mental health exam, and a comprehensive medical history including a complete social history (History and Physical).
  - If the H&P is not completed as required, then the reasons for this (e.g. member declined or appointment was missed, etc.) and efforts to reschedule should be documented in the medical record.
- An Individual Health Education Behavioral Assessment (IHEBA), such as the DHCS-approved Staying Healthy Assessment (SHA), should be completed within 120 days of the member being assigned to the provider.
  - If the IHEBA/SHA is not completed, then the reasons for this and efforts to reschedule any missed appointments that interfered with the completion of the IHEBA/SHA should be documented in the medical record.
- The provision of appropriate preventive services in accordance with the United States Preventive Screening Task Force (USPSTF) A and B recommendations.

The practitioner's signature with the date must be included on the IHEBA/SHA to indicate practitioner review of the patient's entries and so that follow-up may be done as needed. DHCS considers an IHEBA/SHA incomplete when the practitioner's signature and/or date are not found on the IHEBA/SHA.

In addition to the H&P and IHEBA/SHA, PCPs should ensure that the appropriate USPSTF screenings are conducted and that patient refusal or other reasons for them not having been done are documented in the medical record.

To review the CCHP Initial Health Assessment Tip Sheet go to: <https://cchealth.org/healthplan/providers/>

For additional information regarding the IHA, please refer to the following link:

<https://www.dhcs.ca.gov/provgovpart/Documents/AB340/AB340MediCalManagedCareScreeningTools.pdf>

SHA Questionnaires by Age:

<https://www.dhcs.ca.gov/formsandpubs/forms/Pages/StayingHealthy.aspx>

For the most current USPSTF Recommendations, please refer to the following link:

<https://www.uspreventiveservicestaskforce.org/Page/Name/uspstf-a-and-b-recommendations/>

## Health Education Provider Resource Guide

The Health Education Provider Resource Guide can be found here:

[Health-Education-Provider-Resource-Guide.pdf \(cchealth.org\)](#)

The guide provides hotlines and websites for the following services:

- |                               |                                          |
|-------------------------------|------------------------------------------|
| ▪ Asthma                      | ▪ HIV/AIDS                               |
| ▪ Behavioral Health           | ▪ Nutrition, Exercise and Healthy Weight |
| ▪ Breastfeeding               | ▪ Parenting                              |
| ▪ Case and Disease Management | ▪ Pregnancy and Childbirth               |
| ▪ Dental                      | ▪ Smoking Cessation                      |
| ▪ Diabetes                    | ▪ Violence Prevention                    |

## Timely Access to Care Standards

Contra Costa Health Plan ensures the provision of covered health care services in a timely manner appropriate for the nature of the member's condition consistent with professionally recognized standards of practice. Contracted providers are responsible for providing and/or ensuring that their members have access to quality, comprehensive health care services that are medically necessary.

CCHP monitors the provider network access standards through a variety of methods including phone calls to providers' offices to request appointments or record call answer and return times, calls to members to determine in office wait times, facility site reviews, and satisfaction surveys. If any monitoring activities result in identified non-compliance with our standards, providers will receive notification and CCHP will provide time to allow for improvements before additional monitoring. CCHP strives to work collaboratively with providers to ensure that members have timely access to care.

ACCESS STANDARDS	
ACCESS TOPIC	STANDARD
URGENT CARE APPOINTMENTS FOR SERVICES THAT DO NOT REQUIRE PRIOR AUTHORIZATION	Within 48 hours
URGENT CARE APPOINTMENTS FOR SERVICES THAT REQUIRE PRIOR AUTHORIZATION	Within 96 hours
NON-URGENT CARE APPOINTMENTS FOR PRIMARY CARE	Within 10 business days
NON-URGENT CARE APPOINTMENTS FOR SPECIALIST CARE	Within 15 business days
NON-URGENT APPOINTMENTS FOR ANCILLARY SERVICES FOR THE DIAGNOSIS OR TREATMENT OF INJURY, ILLNESS, OR OTHER HEALTH CONDITION.	Within 15 business days
EMERGENCY CARE	Immediately
FIRST PRENATAL VISIT	Within 10 business days of request
MENTAL HEALTH - ROUTINE NON-URGENT	Within 10 business days
MENTAL HEALTH- URGENT	Within 48 hours
MENTAL HEALTH- EMERGENCY	Immediately
MENTAL HEALTH-FOLLOW UP APPOINTMENT	Within 30 days
FOLLOW UP ON MISSED APPOINTMENTS	Providers are expected to review all members that do not show up for scheduled appointments and to identify those requiring follow-up, based on their medical condition.
TELEPHONE WAIT TIME FOR PRACTICE/PLAN TO ANSWER	Within 10 minutes
TELEPHONE CALL BACK WAIT TIME -PRACTICE/ PROVIDER OFFICE	Within 1 business day
TELEPHONE CALL BACK WAIT TIME – TRAIGE	Within 30 minutes
WAITING TIME IN PROVIDER OFFICE	The amount of time a member waits in a provider office and exam room must be reasonable according to the urgency of the individual's condition. In most cases, it is reasonable for a member to wait 45 minutes or less from the time of the patient's appointment until they are taken to the exam room.

## Blood Lead Screening

Federal law requires states to screen children enrolled in Medicaid for elevated blood lead levels as part of required prevention services offered through the Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) program. CCHP must ensure that providers who perform Periodic Health Assessments do the following:

- Provide oral or written anticipatory guidance to parents or guardians about the dangers of lead exposure starting at 6 months of age and continuing until 72 months of age.
- Order or perform blood lead screening tests
  - 1) At 12 months and at 24 months of age;
  - 2) When the provider becomes aware the child is overdue for blood lead screening up to 72 months of age;
  - 3) Any time a change in circumstances has, in the professional judgement of the network provider, put the child at risk; and
  - 4) If requested by the parent or guardian
- Document the reason a blood lead screening was not performed if a parent or guardian refuses or the screening poses a greater risk to the child member's health than the risk of lead poisoning. Providers must obtain a signed statement of voluntary refusal or document why a signed statement of voluntary refusal was not obtained.

## Clinical Practice Guidelines

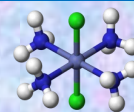
Contra Costa Health Plan (CCHP) met with our Quality Council, a multi-specialty group of clinicians across our provider network, to review CCHP's clinical practice guidelines for adults. The Quality Council approved the preventive guidelines from the U.S. Preventive Services Task Force (USPSTF) and the Advisory Committee on Immunization Practices (ACIP). Updates to the guidelines are summarized below.

- Colon cancer screening (Updated 2021)
  - [Recommendation: Colorectal Cancer: Screening | United States Preventive Services Taskforce \(uspreventiveservicestaskforce.org\)](https://www.uspreventiveservicestaskforce.org)
- Lung cancer screening (Updated 2021)
  - [Recommendation: Lung Cancer: Screening | United States Preventive Services Taskforce \(uspreventiveservicestaskforce.org\)](https://www.uspreventiveservicestaskforce.org)
- Coronavirus (Updated July 9, 2021)
  - [ACIP COVID-19 Vaccine Recommendations | CDC](https://www.cdc.gov/vaccines/imz/adm/covid19.htm)
  - Note: COVID-19 vaccines approved under an emergency use authorization (EUA) include Pfizer-BioNTech, Moderna, and Johnson & Johnson.
- HPV (Updated 2019)
  - [Human Papillomavirus Vaccination for Adults: Updated Recommendations of the Advisory Committee on Immunization Practices | MMWR \(cdc.gov\)](https://www.cdc.gov/mmwr/preview/mmwrhtml/mm6812a1.htm)
- MMR (Updated 2018)
  - [Recommendation of the Advisory Committee on Immunization Practices for Use of a Third Dose of Mumps Virus-Containing Vaccine in Persons at Increased Risk for Mumps During an Outbreak | MMWR \(cdc.gov\)](https://www.cdc.gov/mmwr/preview/mmwrhtml/mm6712a1.htm)
- Pneumonia (Updated 2019)
  - [Use of 13-Valent Pneumococcal Conjugate Vaccine and 23-Valent Pneumococcal Polysaccharide Vaccine Among Adults Aged ≥65 Years: Updated Recommendations of the Advisory Committee on Immunization Practices | MMWR \(cdc.gov\)](https://www.cdc.gov/mmwr/preview/mmwrhtml/mm6812a1.htm)

CCHP will provide updates to the pediatric guidelines in our next issue of the Provider Newsletter.



## Pharmacy and Therapeutics Committee News



The CCHP P&T committee met on 6/11/2021. Updates from the meeting are outlined below:

**\*\*Changes to the PDL will be effective by mid-July 2021\*\***

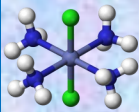
### Updates/Announcements:

#### 1. Fee-For-Service Medi-Cal Carve-Out (Medi-Cal Rx) will begin January 1, 2022:

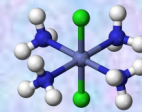
The Department of Health Care Services (DHCS) has announced that Medi-Cal Rx is planned to Go-Live on January 1, 2022. DHCS has completed its review of the Conflict Avoidance Plan (CAP) submitted by Magellan Medicaid Administration (MMA) and announced a January 1, 2022 implementation date.

**Quick reference table for all changes to the Preferred Drug List (PDL) and/or Prior Authorization (PA) criteria (for full details of each change, please see individual drugs listed below this table):**

<u>Changes Made</u>	<u>Drug Name</u>
Created new PA criteria:	Testosterone products: Androderm 2 mg and 4 mg patches, Andro-gel 1% 2.5 gm and 5 gm packets, Vogelxo 1% topical gel in pump  Orilissa (elagolix) 150 mg and 200 mg tablets  Qelbree (viloxazine)
Modified PA criteria:	Freestyle Libre Readers and Sensors  Humira (adalimumab)  Anti-Obesity Medications: Xenical (orlistat) and Qsymia (phentermine/topiramate)  Epidiolex (cannabidiol)  CGRP antagonists: Aimovig, Emgality, Vyepti  Enbrel (etanercept)  Simponi (golimumab)  Infliximab  Xeljanz XR (tofacitinib)  Stelara (ustekinumab)  Entyvio (vedolizumab)
ADDED to the CCHP formulary:	Cabenuva (cabotegravir/rilpivirine) 400 mg/600 mg



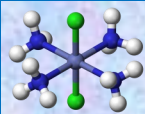
## Pharmacy and Therapeutics Committee News



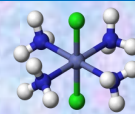
Removed from CCHP formulary:	Pentobarbital sodium 50 mg/mL injection solution Phenobarbital sodium 65 mg/mL and 130 mg/mL injection solution Fosphenytoin 100 mg/2 mL and 500 mg/10 mL injection solution Levetiracetam 500 mg/5 mL IV solution Valproate sodium 500 mg/5 mL IV solution Diazepam 5 mg/mL injection solution/syringe
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- **Newly Established criteria for Testosterone products:** For Androdel 1% packets and Vogelxo 1% gel, requires a trial and failure or found to be intolerant to the first line preferred agents, testosterone cypionate injection or testosterone enanthate injection. For Androderm patches, requires trial and failure of a first line agent and a second line agent.
- **Newly Established criteria for Orlissa (elagolix):** requires a trial and failure to at least 2 NSAIDs and at least one hormonal medication
- **Newly Established criteria for Qelbree (viloxazine):** requires a trial and failure to at least 2 formulary stimulant medications and a trial and failure of Straterra (atomoxetine)
- **Modification of criteria for Freestyle Libre Readers and Sensors:** change criteria to 4 or more tests per day and added an option for approval if member has clinically significant episode of hypoglycemia resulting in acute care or a pattern of hypoglycemia
- **Modification of criteria for Humira (adalimumab):** added indication for polyarticular juvenile idiopathic arthritis. Separated Ulcerative Colitis and Crohn's disease criteria into separate criterias
- **Modification of criteria for Anti-Obesity Medications:** added Xenical criteria (try and fail Alli) and added Qsymia (phentermine/topiramate) criteria of trial and failure of as separate medications
- **Modification of criteria for Epidiolex (cannabidiol):** added criteria for tuberous sclerosis complex
- **Modification of criteria for CGRP antagonists (Aimovig, Emgality, Vyepti):** updated criteria to include documentation of number of headache days per month
- **Modification of criteria for Enbrel (etanercept):** added indication for polyarticular juvenile idiopathic arthritis
- **Modification of criteria for Simponi (golimumab):** added indication for polyarticular juvenile idiopathic arthritis
- **Modification of criteria for infliximab:** separated Ulcerative Colitis and Crohn's disease criteria into separate criterias
- **Modification of criteria for Xeljanz (tofacitnib):** added indication for polyarticular juvenile idiopathic arthritis
- **Modification of criteria for Stelara (ustekinumab):** separated Ulcerative Colitis and Crohn's disease criteria into separate criterias
- **Modification of criteria for Entyvio (vedolizumab):** separated Ulcerative Colitis and Crohn's disease criteria into separate criterias





## Pharmacy and Therapeutics Committee News



### **There are numerous ways to view the CCHP Preferred Drug List:**

CCHP updates the Preferred Drug List (PDL) after each quarterly Pharmacy & Therapeutics Committee meeting. CCHP invites and encourages practitioners to access each update through the following means:

- An interactive searchable formulary is available within Epic (contact the Epic team with any questions related to functionality).
- A printable copy of the CCHP PDL can be found here: <http://cchealth.org/healthplan/pdf/pdl.pdf>
- A searchable copy of the CCHP PDL can be found here: <http://formularynavigator.com/Search.aspx?siteID=MMRREQ3QBC>
- **EPOCRATES – free mobile & online formulary resource**
  - CCHP providers may add the CCHP formulary to their mobile devices using the following steps:
    - Open the Epocrates application on your mobile device.
    - Click on the “formulary” button on the home screen.
    - Click “add new formulary” button on the bottom of the screen.
    - Use the search box to locate “Contra Costa Health Plan” Medi-Cal or Commercial formulary. Click on each formulary that you would like to add, and then click the “add formulary” button.



Epocrates mobile is supported on the iOS (iPhone, iTouch, iPad), Android, & BlackBerry platforms

If you have any questions about the installation or use of Epocrates, please contact Epocrates Customer Support at [goldsupport@epocrates.com](mailto:goldsupport@epocrates.com) or at (800) 230-2150.

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Providers may request a copy of CCHP pharmacy management procedures or specific drug PA criteria by contacting the pharmacy unit directly at 925-957-7260 x1, or via the email listed below.

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P&T updates and DUR educational bulletins can be viewed online at  
<http://cchealth.org/healthplan/provider-pharmacy-therapeutics.php>

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Questions and comments may be directed to CCHP Pharmacy by emailing [joseph.cardinali@cchealth.org](mailto:joseph.cardinali@cchealth.org)

## Member Complaints and Grievances to Provider Offices

All member complaints and grievances, including those member grievances that are handled internally by the provider, must be forwarded to Contra Costa Health Plan (CCHP). If a member is dissatisfied with the service delivered by the provider, providers should offer the member the CCHP grievance form to complete and return it immediately to CCHP's Member Services Department or go online to fill out the grievance form <https://cchealth.org/healthplan/cchp/>. Or you may advise the member to call Member Services at 1-877-661-6230 (option 2) to help resolve the member's issue. The member may also go to the CCHP office to talk to Member Services staff in person.

The PCP office may use CCHP's or its internal complaint and grievance form and should immediately submit all complaints and grievances to the Plan's Member Services Department for resolution. Even in instances where the provider resolves the grievance, it must still be submitted to CCHP to verify that the grievance was addressed, investigated, and resolved appropriately.

If you have any questions, please contact CCHP by e-mail at [Providerrelations@cchealth.org](mailto:Providerrelations@cchealth.org) or by phone 925-313-9500.

## Member Rights and Responsibilities Annual Notice

The following section details information provided to members regarding their rights as members of CCHP. Providers are encouraged to assist members with their grievances and no punitive action will be taken against a provider who supports a member through the appeals process. Also, providers may not take any negative action against a member who files a complaint or grievance against the provider. You may also refer to Appendix J and our website at [www.cchealth.org/healthplan](http://www.cchealth.org/healthplan).

### **Member *rights* and responsibilities include, but are not limited to, the following:**

- The right to receive care with respect regardless of race, religion, education, sex, cultural background, physical or mental handicaps, or financial status.
- The right to receive appropriate accessible culturally sensitive medical services.
- The right to choose a Primary Care Physician in CCHP's network, who has the responsibility to provide, coordinate and supervise care.
- The right to be seen for appointments within a reasonable period of time.
- The right to participate with practitioners in making health care decisions including the right to refuse treatment, to the extent permitted by law.
- The right to receive courteous response to all questions from Contra Costa Health Plan and its Health Partners.
- The right to voice complaints or appeals about Contra Costa Health Plan or the care it provides orally or in writing; and to disenroll.
- The right to health plan information which includes, but is not limited to; benefits and exclusions, after hours and emergency care, referrals to specialty providers and services, procedures regarding choosing and changing providers; and types of changes in services.
- Medi-Cal recipients have the right to seek family planning services from a Medi-Cal provider outside the network without a referral or authorization if the member elects to do so.
- The right to formulate advanced directives.
- The right to confidentiality concerning medical care.
- The right to be advised as to the reason for the presence of any individual while care is being provided.
- The right to access personal medical record.
- The right to have access to emergency services outside of the Plan's provider network.
- Medi-Cal recipients have the right to request a fair hearing.
- The right to interpreter services.
- The right to access Federally Qualified Health Centers and Indian Health Services Facilities.
- The right to access minor consent services.
- The right to receive written Member informing materials in alternative formats, including Braille, large size print and audio format upon request.



## Member Rights and Responsibilities Annual Notice (continued)

- The right to be free from any form of restraint or seclusion used as a means of coercion, discipline, convenience or retaliation.
  - The right to receive information on available treatment options and alternatives, presented in a manner appropriate to the Member's condition and ability to understand.
  - The right to freely exercise these rights without adversely affecting how the Member is treated by the health plan, providers or the state.
  - The right to candid discussion of appropriate or medically necessary treatment options, regardless of cost or benefit coverage
  - A right to be treated with respect and recognition of their dignity and their right to privacy.
  - The right to make recommendations regarding the Contra Costa Health Plan's Member's Rights and Responsibility policy.
  - The right to receive information about the organization, its services, its practitioners and providers and member rights and responsibilities.
- need in order to provide care.
- The responsibility to understand their health problems and participate in developing mutually agreed upon treatment goals, to the degree possible.

### **Member responsibilities include, but are not limited to:**

- The responsibility to provide complete and accurate information about past and present medical illnesses including medications and other related matters.
- The responsibility to follow the treatment plan and instructions agreed upon with your health care providers.
- The responsibility to ask questions regarding condition and treatment plans until clearly understood.
- The responsibility to keep scheduled appointments or to call at least 24 hours in advance to cancel.
- The responsibility to call in advance for prescription refills.
- The responsibility to be courteous and cooperative to people who provide health care services.
- The responsibility to actively participate in their health and the health of the member's family. This means taking care of problems before they become serious, following provider's instructions, taking all medications as prescribed, and participating in health programs that keep one well.
- The responsibility to understand their health problems and participate in developing mutually agreed upon treatment goals, to the best degree possible.
- The responsibility to supply information (to the extent possible) that the organization and its practitioners and providers





# Resilience, Toxic Stress Transformation, and Women's Health

A seminar series

August – November 2021

*FREE to Medi-Cal providers*

Research shows that Adverse Childhood Experiences (ACEs) can cause toxic stress and affect health throughout the lifespan and across generations. As women's health care teams, we are our patients' partners and thus have a unique opportunity to influence life course and intergenerational health.

## How should we engage with resilience and trauma in women's health?


**Goal:** This series offers tools, discussion, and community to learn how to best care for our patients, to care for ourselves, and to connect with the purpose, meaning, and joy in our work.


The course combines interactive training, practice-based learning, and lessons from experts. Pertinent resources will be shared.

**Audience:** medical providers, behavioral health clinicians, medical assistants, health educators, other women's health team members, or anyone interested in the topic.

## Participants will:

- Examine the dynamics and health effects of resiliency and trauma through an intergenerational, equity-focused women's health lens;
- Explore how to engage with patients around resilience, trauma, and their health effects in clinical encounters;
- Apply emerging science of epigenetics and intergenerational trauma, and learn evidence-based interventions to heal toxic stress and promote health across the lifespan;
- Support our own resilience and well-being in the process of providing excellent care.

 All sessions will take place online through Zoom. Please plan to attend all or most sessions.

 **Please send any questions and RSVP to Sara Johnson, MD at [sjohnson@laclinica.org](mailto:sjohnson@laclinica.org)**

Fall 2021	Topics	Day: Tuesdays Time: 8:30 - 10:30am
Pre-Session	<b>ACES, toxic stress, and an intergenerational perspective on resilience and trauma</b>	August 24
Session 1	<b>Introduction to the series; Stress and Resilience in our Community</b> Guest: Brittany Chambers, PhD, Assistant Professor and Leader of SOLARS Study, UCSF Department of Epidemiology and Biostatistics	September 7
Session 2	<b>Mindful Movement and the Embodied Stress Response</b> Guest: Jasmine Allen, Trauma-Informed Yoga Teacher	September 21
Session 3	<b>Healing Relationships</b> Guest: Gloria Castro, PsyD, UCSF Child Trauma Research Program	October 5
Session 4	<b>Trauma-Informed Nourishment for Women's and Next Generation Health</b> Guests: Adrienne Markworth, Executive Director and Monica Bhagwan, Program Manager, Leah's Pantry	October 19
Session 5	<b>Restorative Sleep for Women's Health</b> Guest: Natalie Soloman, PsyD, Stanford Sleep and Insomnia Program	November 2
Session 6	<b>Supportive Exercise for Women's Health</b> Guests: Caitlin Ritt, the Lotus Method and Erin Bremond, Ground Wellness	November 16
Session 7 (optional)	<b>Putting it All Together: Trauma-informed teams and systems to support resilience and heal toxic stress</b>	November 30





## ACEs Screening

The groundbreaking Adverse Childhood Experiences Study (ACE Study) conducted by Kaiser Permanente and the Centers for Disease Control and Prevention (CDC) demonstrated the important link between ACEs adversity in childhood and health outcomes in adulthood. Over 60 percent of Californians have experienced at least one ACE, and 16.7 percent have experienced four or more. Scientific data shows that early detection and early intervention significantly improves health outcomes.<sup>1</sup>

Primary care is often the first point of contact for patients and families and well positioned to screen and respond to ACEs in children and adults. Developing people, processes, and systems to screen and respond to ACEs screening in primary care requires strong leadership, education and training, links to internal and community resources, and tools you can apply right away in your care teams.

ACEs Aware ([Home | ACEs Aware – Take action. Save lives.](#)), an initiative led by the Department of Health Care Services (DHCS) and the Office of the California Surgeon General (CA-OSG), has great resources for busy primary care practices. We encourage you to check these out.

### Training for providers and care team

**Becoming ACEs Aware in California Training:** Two-hour training to learn about ACEs, toxic stress, screening, risk assessment, and evidence-based care to effectively intervene on toxic stress.

While only certain Medi-Cal provider types are eligible to receive payment (full list available here: <https://www.acesaware.org/learn-about-screening/billing-payment/eligible-providers/>), other care team members may provide an ACE screening and then have the supervising physician bill Medi-Cal on their behalf. Here is an [FAQ](#) with additional information:

### Workflows to screen and respond to patients with a positive ACE score

We know that screening often identifies challenging issues that need to be addressed. ACEs Aware is planning to release promising practices for screening patients via telehealth. In the meantime, we encourage you to review the [Suggested Clinical Workflows for Screening](#) and [Provider-Toolkit-Clinical-Response-to-ACEs-and-Toxic-Stress.pdf \(acesaware.org\)](#). The [Clinical Team Toolkit](#) has additional information about how to implement ACE screening and response at the clinic level.

[Provider-Toolkit-Clinical-Response-to-ACEs-and-Toxic-Stress.pdf \(acesaware.org\)](#). If you'd like to discuss more about how to address stressors identified on the ACEs screening, please reach out to us at [tammy.fisher@cchealth.org](mailto:tammy.fisher@cchealth.org). CCHP is working with First 5 and other partners in Contra Costa to develop a system of care to address these concerns (more information below).

### Join the Contra Costa Network of Care

Implementing a comprehensive approach in primary care to screen, treat, and heal the effects of childhood adversity is no easy feat. We don't have to do it alone. Contra Costa has a network of trauma-informed practitioners who come together to share resources and work through challenges. You can join the network at [www.contracostanetworkofcare.org](http://www.contracostanetworkofcare.org), and start posting questions, events, and tap into resources co-developed with experts in the field including Trauma learning modules. The Network is made possible through a grant to First 5 Contra Costa from the Office of the California Surgeon General (CA-OSG) and the California Department of Health (DHS) ACEs Aware Initiative. It is a collaborative partnership with Trauma Transformed, Children's Leadership Council, Contra Costa Health Services, and Employment and Human Services. Please reach out with questions, ideas, and feedback at [nblackmur@first5coco.org](mailto:nblackmur@first5coco.org).

### References:

California Department of Public Health, Injury and Violence Prevention Branch (CDPH/IVPB), University of California, Davis, Violence Prevention Research Program, California Behavioral Risk Factor Surveillance System (BRFSS), 2011-2017.



## Shriner Hospital for Children – Northern California 2021 Virtual Provider CME Program

We are excited to announce our upcoming Virtual Provider Continuing Medical Education (CME) series focused on developmental disabilities, from understanding how to tap into resources to clinical management and new innovations. Our mission is to improve the lives of children by offering outstanding specialty care education programs for medical professionals. Our monthly CME webinars are offered at **no cost to you**.

**Special Invitation for:** Pediatricians, PCPs, RNs, School-based Nurses, Physical Therapists

### Management of Gait Abnormalities in Children with Cerebral Palsy– What Every Pediatric Provider Needs to Know

**Presenter:** Jon Davids, MD, Assistant Chief of Orthopedic Surgery & Medical Director, Motion Analysis Center

**Date & Time:** September 14, 2021, from 6:00 – 7:00 p.m. PST

#### Learning Objectives:

- Identify the Gross Motor Function Classification System (GMFCS) for children with Cerebral Palsy (CP).
- Describe the rationale for Single Event Multilevel Surgery (SEMLS) to improve gait in children with CP and discuss the Diagnostic Matrix approach to clinical decision-making for surgery to improve gait in children with CP.
- Compare and contrast the most common surgeries performed to improve gait in children with CP.
- List the use of orthotics and post-operative physical therapy to achieve the best outcomes follow SEMLS.
- Describe how and when to refer a patient with gait abnormalities.

**[Register Here!](#)**

**Spina Bifida (details forthcoming)**



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for Children®— Northern California

## Byram Healthcare – DME



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⇒ Wound – phone (877) 742-1972, fax (800) 642-4639 or email [All-westwound@byramhealthcare.com](mailto:All-westwound@byramhealthcare.com)

⇒ Breast Pumps – phone (877) 773-1972, fax (800) 773-1972 or email

[Breast-pumps@byramhealthcare.com](mailto:Breast-pumps@byramhealthcare.com) Online ordering [www.breastpumps.byramhealthcare.com](http://www.breastpumps.byramhealthcare.com)

# Welcome Community Provider Network (CPN) Providers

## Specialty Care Providers

Ferris Powell, NP	Mid-level - Nephrology	BASS Medical Group, Inc., Concord
Peggy Dip, NP	Mid-level - Nephrology	Chabot Nephrology Medical Group, Castro Valley
Michael Peterson, MD	Surgery - General Vascular, Wound Care	East Bay Cardiovascular and Thoracic Associates, Danville
Diana Riley, PA	Mid-level - Dermatology	Golden State Dermatology Associates, Inc., Brentwood
Paige Radell, MD	Dermatology	Golden State Dermatology Associates, Inc, Pleasanton
Nam Nguyen, DPT	Physical Therapy	John Muir Physician Network, Brentwood
Tiffany Pham, MD	Obstetrics And Gynecology	John Muir Physician Network, Orinda
Rosemary Degado, MD	Obstetrics And Gynecology	John Muir Physician Network, Walnut Creek
Sari Kasper, DO	Obstetrics And Gynecology	John Muir Physician Network, Walnut Creek
Shannon Sullivan-Cramer, MD	Obstetrics And Gynecology	John Muir Physician Network, Walnut Creek
Timothy Leach, MD	Obstetrics And Gynecology	John Muir Physician Network, Walnut Creek
Mustafa Kazemi, MD	Pulmonary Disease	M Michael Kazemi MD AMC, San Ramon
Brittany Pamplin, DPT	Physical Therapy	Muir Orthopaedic Specialists, Concord
Jason Agdinaoay, DPT	Physical Therapy	Muir Orthopaedic Specialists, Concord
Joshua Richards, MD	Surgery - Orthopaedic	Muir Orthopaedic Specialists, San Ramon
Kayla Utley, PT	Physical Therapy	Muir Orthopaedic Specialists, San Ramon
Shaily Shah, MD	Ophthalmology	Northern California Cornea Associates, Inc., Walnut Creek, Oakland
Erin Bennett, NP	Mid-level - Family Planning	Planned Parenthood, Concord
Lara Crystal-Ornelas, MD	Family Planning	Planned Parenthood, Walnut Creek
Derek Nunn, LPCC	Licensed Professional Clinical Counselor	Serene Health, Sacramento
Julissa Sparks, LPCC	Licensed Professional Clinical Counselor	Serene Health, Sacramento
Maricela Partida, LCSW	Clinical Social Work	Serene Health, Sacramento
Maura Gegenwarth, SLP	Speech Pathology	Seven Bridges Therapy, Oakland, Martinez, Walnut Creek, Pleasant Hill
Hanah Kropf, DPT	Physical Therapy	Spine and Sports Physical Therapy, Concord
Christina Ashby, OT	Occupational Therapy	Spine and Sports Physical Therapy, Livermore
Kennedy Gillespie, PT	Physical Therapy	Spine and Sports Physical Therapy, Livermore
Miles Sabatini, DO	Optometry	Vallejo Optometry Group, Vallejo

## Primary Care Providers

Alicia Zhou, DO	Pediatrics	John Muir Physician Network, Concord
Claudine Cho, NP	Pediatrics	John Muir Physician Network, San Ramon, Pleasanton
Audrey Arai, MD	Family Medicine	John Muir Physician Network, Walnut Creek
Caitlin Hanavan, NP	Family Medicine	La Clinica De La Raza, Pittsburg
Ashli Butler, NP	Family Medicine	LifeLong Medical Care, Berkeley
Jennifer Weise, PA	Family Medicine	LifeLong Medical Care, Berkeley
Jessica Liu, MD	Internal Medicine	LifeLong Medical Care, Berkeley
Angelina Molina, FNP	Mid-level - Family Medicine	LifeLong Medical Care, San Pablo

# Welcome Community Provider Network (CPN) Providers

## Mental Health

Alana Samaha, MFTI	Mental Health Therapist/Counselor	3Prong Health, Fremont, San Francisco, Turlock
Deepak Kumar, MD	Psychiatry	3Prong Health, Fremont, San Francisco, Turlock
Elane Conboy, MFTI	Mental Health Therapist/Counselor	3Prong Health, Fremont, San Francisco, Turlock
Kelly Reyes, MFTI	Mental Health Therapist/Counselor	3Prong Health, Fremont, San Francisco, Turlock
Kristin Hernandez, MFTI	Mental Health Therapist/Counselor	3Prong Health, Fremont, San Francisco, Turlock
Krtistine Izedi, MFTI	Mental Health Therapist/Counselor	3Prong Health, Fremont, San Francisco, Turlock
Marianne Mendoza, ASW	Clinical Social Work	3Prong Health, Fremont, San Francisco, Turlock
Min Cen, NP	Mid-level - Psychiatry	3Prong Health, Fremont, San Francisco, Turlock
Monique Ordone, MFT	Mental Health Therapist/Counselor	3Prong Health, Fremont, San Francisco, Turlock
Natiha Alva-House, ASW	Clinical Social Work	3Prong Health, Fremont, San Francisco, Turlock
Nayeem Lokhandwala, MFT	Mental Health Therapist/Counselor	3Prong Health, Fremont, San Francisco, Turlock
Robert Snyder, MFTI	Mental Health Therapist/Counselor	3Prong Health, Fremont, San Francisco, Turlock
Sunpreet Singh, MD	Psychiatry	3Prong Health, Fremont, San Francisco, Turlock
Elena Dobbs, Psy.D	Psychology	3Prong Health, Fremont, Turlock, San Francisco
Karen Helmuth, Psy.D	Psychology	Autism Center of Northern California, San Francisco
Eva Kowalewicz, PhD	Psychology	Best Steps Clinical Testing, Santa clara, Vallejo
Marina Robles, LCSW	Clinical Social Work	Brighter Beginnings Family Health Clinic, Antioch, Richmond
Vasundhara Vemula, MD	Psychiatry	Comprehensive Psychiatric Services, San Francisco
Ghulam Noorani, MD	Psychiatry	Comprehensive Psychiatric Services, Walnut Creek
Jean Gauvin, MD	Psychiatry	Comprehensive Psychiatric Services, Walnut Creek
Donna Schwitters, MFT	Mental Health Therapist/Counselor, Substance Abuse Professional	Donna Schwitters, MFT, Brentwood
Elizabeth Delgado, LCSW	Mental Health Therapist/Counselor	La Clinica De La Raza, Pittsburg
Jenna Reeder, NP	Mid-level - Psychiatry	LifeLong Medical Care, Berkeley
Lila Samady, LCSW	Mental Health Therapist/Counselor	LifeLong Medical Care, Berkeley
Diane Kaljian, LCSW	Clinical Social Work	LifeLong Medical Care, Pinole
Ann Sussman, LCSW	Clinical Social Work	LifeLong Medical Care, Richmond
Emily Lindquist, MFTI	Mental Health Therapist/Counselor	Planned Parenthood, Walnut Creek
Catherine Alix, MFT	Mental Health Therapist/Counselor	Serene Health, Sacramento
Connie Murcia, LCSW	Clinical Social Work	Serene Health, Sacramento
Jeanette Vo-Vu, LCSW	Clinical Social Work	Serene Health, Sacramento
Jennifer Guerguis, MFT	Mental Health Therapist/Counselor	Serene Health, Sacramento
Kimmil Hollis, MFT	Mental Health Therapist/Counselor	Serene Health, Sacramento
Mahdis Bormand, MFT	Mental Health Therapist/Counselor	Serene Health, Sacramento
Donn Bradley, MFTI	Mental Health Therapist/Counselor, Substance Abuse Professional	Silver Fern Child and Family Therapy, Inc, Walnut Creek
Katy Scimia, MFTI	Mental Health Therapist/Counselor	Silver Fern Child and Family Therapy, Inc, Walnut Creek
Jonathan Schwab, MFT	Mental Health Therapist/Counselor	Touchstone Counseling, Pleasant Hill
Victoria Marlow, MFT	Mental Health Therapist/Counselor	Victoria Marlow, MFT, Lafayette

# Welcome Community Provider Network (CPN) Providers

## Behavior Analysts

Maria Dorski, RBT	A Behavioral Health Cooperative, LLC, El Sobrante
Nicole Westbrook, DC	A Behavioral Health Cooperative, LLC, El Sobrante
Anastacia Ilili, BA	ABA Plus Inc., San Ramon
MarieYsbelle Reyes, RBT	ABA Plus Inc., San Ramon
Paul Hanhan, BCBA	ABA Plus Inc., San Ramon
Eduardo Perez, BA	ABA Plus Inc., San Ramon, Hayward
Hosanna Ambegia-Vinoya, RBT	ABA Plus Inc., San Ramon, Hayward
Mira Doria, BS	ABA Plus Inc., San Ramon, Hayward
Rabita Osorio, MS	ABA Plus Inc., San Ramon, Hayward
Shelby Mefford, RBT	ABA Plus Inc., San Ramon, Hayward
Alejandra Cornejo-Gonzalez, RBT	Adapt A Behavioral Collective, Inc., San Francisco, Stockton
Brandon Garay, RBT	Adapt A Behavioral Collective, Inc., San Francisco, Stockton
John Chung, MA	Autism Intervention Professionals, Fremont
Kaitlin Roberts, RBT	Autism Intervention Professionals, Fremont
Raul Parra, RBT	Autism Intervention Professionals, Fremont
Saydie Alvarez, RBT	Autism Intervention Professionals, Fremont
Syeda Zia, RBT	Autism Intervention Professionals, Fremont
Vitaliya Buynevich, RBT	Autism Intervention Professionals, Fremont
Waynisha Butler, BA	Autism Intervention Professionals, Fremont
Adhanet Tesfai, BCBA	Autism Learning Partners, LLC, San Jose, Burlingame
Jasmine Mendoza, BCBA	Autism Learning Partners, LLC, San Jose, Burlingame
Travis Berg, BCBA	Autism Learning Partners, LLC, San Jose, Burlingame
Sophia Vo, M.Ed.	Autism Learning Partners, LLC, San Jose, Burlingame, San Ramon, San Leandro
Hunter Demaray, BCBA	Bay Area Behavior Consultants, LLC, Richmond
Milagros Cervantes, RBT	Bay Area Behavior Consultants, LLC, Richmond
Christina Cordero, RBT	Behavior Treatment and Analysis, Inc, Walnut Creek
Sara Aboei, BS	Behavior Treatment and Analysis, Inc, Walnut Creek
Ileana Diaz, BCBA	Behavioral Health Works, Inc., Hayward
Roxana Radu, BCBA	Behavioral Health Works, Inc., Hayward
Pallavi Kulkarni, BCBA	Butterfly Effects, LLC, Stockton
Sana Khan, BCBA	Butterfly Effects, LLC, Stockton
Shadeed Hasan, BCBA	Butterfly Effects, LLC, Stockton
Alicia Like, BCBA	Center for Autism and Related Disorders, LLC, Antioch
Danilo Decena, BCaBA	Center for Autism and Related Disorders, LLC, Antioch
Ann Derentz, BCBA	Center for Autism and Related Disorders, LLC, San Ramon, Pleasanton
Aurora Serrano, BA	Center for Autism and Related Disorders, LLC, Walnut Creek
Maryssa McKenzie, BCBA	Center for Autism and Related Disorders, LLC, Walnut Creek
Raquel Rios, BCBA	Center for Behavioral Solutions, Vallejo, Pleasant Hill
Briana Brown, M.Ed.	Center for Social Dynamics, Alameda, Martinez
Chelsea Hickison, BTL1	Center for Social Dynamics, Alameda, Martinez
Christina Alizaga, BTL1	Center for Social Dynamics, Alameda, Martinez



# Welcome Community Provider Network (CPN) Providers

## Behavior Analysts continued

Emma Reda, BA	Center for Social Dynamics, Alameda, Martinez
Emmaline Schwartz, BTL1	Center for Social Dynamics, Alameda, Martinez
Grace Choy, BTL1	Center for Social Dynamics, Alameda, Martinez
Jack Valentine, BTL1	Center for Social Dynamics, Alameda, Martinez
JasonAaron Ebuon, BTL1	Center for Social Dynamics, Alameda, Martinez
Jeanette Aleman, MS	Center for Social Dynamics, Alameda, Martinez
Larissa Garcia-Melara, BTL1	Center for Social Dynamics, Alameda, Martinez
Lizet Ortega, BA	Center for Social Dynamics, Alameda, Martinez
Mia Borlongan, BTL1	Center for Social Dynamics, Alameda, Martinez
Miroslava Barba-Perez, BTL1	Center for Social Dynamics, Alameda, Martinez
Phuong Tiet, BS	Center for Social Dynamics, Alameda, Martinez
Rebecca Fitman, MS	Center for Social Dynamics, Alameda, Martinez
Sabrina Cortes, BTL1	Center for Social Dynamics, Alameda, Martinez
Shala Simms, BCBA	Center for Social Dynamics, Alameda, Martinez
Tina Harper, BTL1	Center for Social Dynamics, Alameda, Martinez
Viviana Aleman Sanchez, BTL1	Center for Social Dynamics, Alameda, Martinez
Wendell Camales, BTL1	Center for Social Dynamics, Alameda, Martinez
Wintrest Hampton, MSW	Center for Social Dynamics, Alameda, Martinez
Victoria Athey, BCBA	Center for Social Dynamics, Martinez
Rhonalyn Santos, BCBA	Centria Healthcare Autism Services, Walnut Creek
Alexa Sanchez, RBT	Gateway Learning Group, Concord
Jacqueline Hammoude, RBT	Gateway Learning Group, Concord
Lucy Devin-McCaig, RBT	Gateway Learning Group, Concord
Marnie Christison, BCBA	Gateway Learning Group, Concord
Rachel Feller, RBT	Gateway Learning Group, Concord
Stephanie Cortez, RBT	Gateway Learning Group, Concord
Yamilitza Ramos-Sanchez, BCBA	Gateway Learning Group, Concord
Yarixa Gonzalez Romero, RBT	Gateway Learning Group, Concord
Emily Mwashita, BCBA	Juvo Autism and Behavioral Health Services, Concord
Dawn Fleminger, BCBA	Positive Behavior Supports Corp, San Francisco
Emily Reinheimer, BCBA	Positive Behavior Supports Corp, San Francisco
Sara Keen, BCBA	Positive Behavior Supports Corp, San Francisco
Monica Yeo, BCBA	Positive Behavior Supports Corp, San Francisco, San Jose, San Ramon
Dino Johnson, BCBA	Positive Behavior Supports Corp, San Francisco, San Ramon, San Jose
Alyssa Youngquist, BCBA	Positive Pathways LLC, San Francisco
Cathy Hernandez, RBT	Positive Pathways LLC, San Francisco
Crystal Coaxum, M.Ed.	Positive Pathways LLC, San Francisco
Elizabeth De la Garza, BCBA	Positive Pathways LLC, San Francisco
Jordan Adams, BCBA	Positive Pathways LLC, San Francisco
Karina Alvarez, MS	Positive Pathways LLC, San Francisco
Nissa-Belle Vidal, BCBA	Positive Pathways LLC, San Francisco
Stephanie Saeteurn, MA	Positive Pathways LLC, San Francisco



## Welcome Community Provider Network (CPN) Providers

### Facilities

Golden State Dermatology Associates, Inc.	Pathology Laboratory	Walnut Creek
CareOne Home Health - Bay Area, Inc.	Home Health	Pleasanton
RAI - Bancroft Ave Oakland	Dialysis	Oakland
Phlebexpress, Inc	Laboratory	Temecula
CardioNet, LLC	DME & Medical Supplies	Melville
Pinnacle Surgery Center, Inc.	Surgery Center	Walnut Creek
Pacific Medical	Orthotic & Prosthetic	Walnut Creek
AccentCare Home Health of California	Private Duty Nursing	San Ramon
DaVita Labs North SGA	Dialysis	Deland
Lifeguard Hospice Care, Inc.	Hospice - Outpatient	Pleasanton
DaVita - Oakland Laurel Dialysis	Dialysis	Oakland

### RMC Providers

Alexis Chaet-Lopez, MD	Family Medicine
Ama Baffoe-Bonnie, MD	Pediatrics
Ariel Postone, MD	Family Medicine
Bianka Aguilar, MD	Family Medicine
Chiu Tung, MD	Anesthesiology
Chiu Tung, MD	Anesthesiology
Francis Wright, MD	Obstetrics And Gynecology
Hillary Carneal, MD	Family Medicine
Jeffrey Lewis, MD	Anesthesiology
John Hawkins, MD	Family Medicine
Jonathan Wong, MD	Obstetrics And Gynecology
Kali Hobson, MD	Psychiatry
Kara Percival, MD	Pediatrics
Karlee Kirkpatrick, DO	Family Medicine
Mallory Cless, MD	Family Medicine
Maya De Groote, MD	Family Medicine
Pranathi Mruthyunjaya, MD	Psychiatry
Raja Sivamani, MD	Dermatology
Robert Hill, DO	Family Medicine
Shan Elahi, MD	Psychiatry
Shivani Srivastav, MD	Pediatrics
Stephanie Glick, MD	Family Medicine
Tenzin Ngadon, NP	Family Medicine
Tiffany Ku, MD	Family Medicine
Tristen Adams, MD	Family Medicine

Reminder!

# THE BULLETIN BOARD

## Attention: Provider Network Trainings

Next Meeting Date: **October 19, 2021**

Times and Location: Zoom

Click to Register on the time you would like to attend:

7:30 AM – 9:00 AM

12:00 PM – 1:30 PM

5:00 PM – 6:30 PM

Questions: Send an email to  
[Vanessa.Pina@cchealth.org](mailto:Vanessa.Pina@cchealth.org)



Using any computer at any time, this free web-based tool allows you to:

- Check your patients' eligibility and insurance information,
- Submit appeals,
- Look up claims or referrals, or view your patients' records

To sign up for access to the ccLink Provider Portal, complete the Portal Access Agreement located on this web page: <https://cchealth.org/healthplan/providers/> and download the PDF under the ccLink logo (right side of screen). For questions regarding ccLink, please email [CCHPportalsupport@cchealth.org](mailto:CCHPportalsupport@cchealth.org).

## Electronic Claim Submissions

Enroll in CCHP's EDI program so you can send claims and receive payments electronically.

For more information, email:  
[EDIsupport@cchealth.org](mailto:EDIsupport@cchealth.org)

## Interpreter Services

Providers needing help with interpreter services or needing help with arranging face-to-face American Sign Language interpretation services may call

**(877) 800-7423 option 4.**

## CCHP Online Resources:

[www.cchealth.org/healthplan/providers](http://www.cchealth.org/healthplan/providers)

Uninsured individuals:  
[www.cchealth.org/insurance](http://www.cchealth.org/insurance)



## HOLIDAYS OBSERVED BY CCHP

September 6, 2021 — Labor Day

November 11, 2021 — Veterans Day

Our **Advice Nurse Unit** is available for our members 24 hours a day, 7 days a week including holidays. Members can call The Advice Nurse Unit at **(877) 661-6230, Option 1.**





## CCHP Directory

595 Center Ave. Suite 100  
Martinez, CA 94553  
[www.cchealth.org](http://www.cchealth.org)



**Provider Online Forms and Resources—**<https://cchealth.org/healthplan/providers/>

### Authorization Department / Hospital Transition Nurse

- Phone: (877) 800-7423, option 3
- Prior Authorization Requests—Please use the cclink Provider Portal for all communication with the following exceptions:
  - **Medi-Cal Member:**
    - ◊ Inpatient (Hospital)/Face Sheet: Fax: (925) 313-6645
    - ◊ Mental Health: Fax: (925) 313-6196
  - **Commercial Member:**
    - ◊ Confidential Mental Health: Fax: (925) 313-6196
- Email Auth Questions (**do not email auth requests**): [CCHPauthorizations@cchealth.org](mailto:CCHPauthorizations@cchealth.org)

### Claims Department

- Phone: (877) 800-7423, option 5
- Email Claims Questions: [ClaimStatus@cchealth.org](mailto:ClaimStatus@cchealth.org)
- Email Appeals Questions: [Appeals@cchealth.org](mailto:Appeals@cchealth.org)
- Email Claim Disputes: [ProviderDispute@cchealth.org](mailto:ProviderDispute@cchealth.org)
- Email Electronic Claims/Payments (EDI program) [EDIsupport@cchealth.org](mailto:EDIsupport@cchealth.org)

### Facility Site Review Department

- Email: [CCHPfsr@cchealth.org](mailto:CCHPfsr@cchealth.org)

### Interpreter Services

- Phone: (877) 800-7423, option 4

### Member Eligibility and Primary Care Physician Assignment

- Phone: (877) 800-7423, option 1
- cclink Provider Portal (web based eligibility checks) [www.cchealth.org/](http://www.cchealth.org/)

### Member Services Department (calling on behalf of a member that is with you)

- Phone: (877) 800-7423, option 7

### Pharmacy Department

- Phone: (877) 800-7423, option 2

### Provider Relations Department

- Phone: (877) 800-7423, option 6
- Fax: (925) 646-9907
- Email General Questions: [ProviderRelations@cchealth.org](mailto:ProviderRelations@cchealth.org)
- Email Contract Related Questions: [CCHPcontracts@cchealth.org](mailto:CCHPcontracts@cchealth.org)
- Email Credentialing Related Questions: [CCHPcredentialing@cchealth.org](mailto:CCHPcredentialing@cchealth.org)